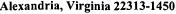
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PART B - FEE(S) TRANSMITTAL

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			or <u>Fax</u>	(5/1) 2/3-2885			
appropriate All further con	respondence including the location or directed otherwise	Patent, advance ord	lers and notification	of maintenance fees v	ired). Blocks 1 through 5 s vill be mailed to the current and/or (b) indicating a sep	correspondence address as	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must			
75	90 11/07/2005		have its own certificate of mailing or transmission.				
Thomas H. Close					rtificate of Mailing or Tran		
Patent Legal Staff Eastman Kodak Company				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Ston ISSUE FFE address above or being facsimile			
343 State Street				addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
Rochester, NY 14650-2201				June Carragna (Depositor's name)			
				Sy	y larga	Ma (Signature)	
		_		030	oning &	2006 (Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVEN		TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/620,670	10/620,670 07/16/2003 Micha		Michael L. Boroso	n	86030RLO	9561	
TITLE OF INVENTION: A	PERTURE RATIO OR RES	OLUTION OF AN	OLED DEVICE BY	LIMITING THE EDO	GE TAPER REGION		
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E PU	IBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	02/07/2006	
EXAMINER		ART UNI	T CI	ASS-SUBCLASS]		
SCHILLING, RICHARD L		1752		430-020000			
Address form PTO/SB/12 "Fee Address" indicat	ence address (or Change of	Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT (print o	or type)			
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	clow, no assignee do of this form is NOT	lata will appear on to a substitute for filing		nee is identified below, the c		
(A) NAME OF ASSIGNI	a substitute for filling an assignment. 02/06/2006 MBIZUNE2 00000123 10620670 RESIDENCE: (CITY and STATE OR COUNTRY)						
EASTMAN KODAK COMPANY			01 FC:1501 1400.00 OP 02 FC:1504 300.00 OP				
343 STATE STREET, ROCHESTER, NY 14650-2201 Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							
4a. The following fee(s) are	enclosed:		Payment of Fee(s):				
Issue Fee			A check in the amount of the fee(s) is enclosed.				
				Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to			
Advance Order - # of	Copies		Deposit Account Nu	mber	(enclose an extra c	copy of this form).	
5. Change in Entity Status a. Applicant claims St	(from status indicated above MALL ENTITY status. See		☐ b. Applicant is no	longer claiming SMA	LL ENTITY status. See 37 C	FR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issu ublication Fee (if required) words of the United States Pate	ne Fee and Publicati vill not be accepted ent and Trademark (on Fee (if any) or to from anyone other the Office.	re-apply any previousl an the applicant; a regi	y paid issue fee to the applications years attorney or agent; or t	ation identified above. he assignee or other party in	
Authorized Signature	Panela R	Cracker	14pc	Date	1-30-06	7	
Typed or printed name	arnela ~ "	Crocker	<u> </u>	Registration			
an application. Confidentiali submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virgi Alexandria, Virginia 22313-	ty is governed by 35 U.S.C. plication form to the USPT for reducing this burden, sh nia 22313-1450. DO NOT 1450.	122 and 37 CFR 1 O. Time will vary of sould be sent to the SEND FEES OR C	.14. This collection is depending upon the inchief Information OOMPLETED FORM	s estimated to take 12 andividual case. Any conficer, U.S. Patent and S TO THIS ADDRESS		ng gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,	
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